EXHIBIT 13

IN THE CIRCUIT COURT OF PULASKI COUNTY, ARKANSAS THIRD DIVISION 2 EDISON RUNYAN; DWIGHT RIPES; EARL L. PURIFOY; JOHN ROSS, As the Legal Representative of ELIZABETH ROSS; MARY 3 WEIDMAN; DURAIN WEIDMAN; MARION HARRIS; and VAN R. NOLAN, Each Individually, and on Behalf of All Others 4 Similarly Situated, 5 Plaintiffs 6 ν. CV 2009-2066 7 TRANSAMERICA LIFE INSURANCE COMPANY; LIFE INVESTORS INSURANCE COMPANY OF AMERICA; MONUMENTAL LIFE INSURANCE 8 COMPANY; and AEGON USA, INC., 9 Defendants 10 12 13 BE IT REMEMBERED, that on the 23rd day of April, 14 2009, the above-referenced cause came before the 15 Honorable Jay Moody for hearing. The proceedings were 16 had and done as follows: 17 18 19 20 21 22 23 24 25

٠	
1	APPEARANCES
2	REPRESENTING THE PLAINTIFFS: TOM THOMPSON, Esquire
3	CASEY CASTLEBERRY, Esquire Murphy, Thompson, Arnold, Skinner & Castleberry
4	Post Office Box 2595 Batesville, Arkansas 72503
5	STAN P. BAUDIN, Esquire
6	Pendley, Baudin & Coffin, LLP 24110 Eden Street
7	Plaquemine, Louisiana 70764
8	PHILIP BOHRER, Esquire SCOTT E. BRADY, Esquire
9	Bohrer Law Firm, LLC 8712 Jefferson Highway, Suite B
10	Baton Rouge, Louisiana 70809
11	REPRESENTING THE DEFENDANT:
12	LYN PRUITT, Esquire JOHN K. BAKER, Esquire
13	Mitchell, Williams, Selig, Gates & Woodyard, PLLC 425 West Capitol Avenue, Suite 1800
14	Little Rock, Arkansas 72201
15	MARKHAM R. LEVENTHAL, Esquire Jordan Burt, LLP
16	777 Brickell Avenue, Suite 500 Miami, Florida 33131
17	Miami, Professor
18	
19	
20	
21	
22	
23	
24	
25	

1.5

THE COURT: We are on the record in civil case 2009-2066, Edison Runyan, et al, v. Transamerican Life Insurance Company, here on a joint motion for preliminary approval of the class settlement.

I have gone through the documents and I think I'm pretty much up to speed about what we're going to do here today. Who would like to take over? Mr. Baker?

MR. BAKER: Your Honor, I am John Baker. I am here with my partner, Lynn Pruitt, on behalf of the defendants. I wanted to introduce Your Honor to a Floridian who has been admitted pro hoc vice, who also represents the defendants, Mr. Mark Leventhal from Jordan Burt in Miama.

We also have plaintiff's counsel from Batesville, Arkansas, Mr. Thompson and Mr. Castleberry, and then we have some Louisiana attorneys who also have been admitted pro hoc vice, Mr. Baudin, Bohrer, and Brady.

I think that's right. The three Bs.

THE COURT: Welcome everybody.

MR. BAKER: And Your Honor, we have clean copies of a proposed order that was attached to the joint motion. The only thing that's really changed in it is, we filled in the dates when we all filed the joint motion. We've left blank, if Your Honor is inclined to grant it, the date on which the final hearing would be

1.5

held. We believe that according to the calculations in the settlement documents, that likely has to occur after around July 16th or 17th. So if you're inclined to look favorably upon our proposed order that we have here for Your Honor to consider, the final hearing would be sometime -- hopefully Debbie could find a day in the last two weeks of July or, I guess, early August.

But essentially, I want to introduce

Mr. Leventhal to kind of give you just a thumbnail

sketch of what has brought us to this settlement or

proposed settlement and the history of it. We know the

dry written word sometimes can be encapsulized much

more quickly in an oral recitation. We know you've

read the pleadings. But Mr. Leventhal wants to give

you a bit of background on that, and I know the

plaintiffs want to address the Court briefly, as well.

THE COURT: All right.

MR. LEVENTHAL: Good afternoon, Your Honor. Mark Leventhal from Jordan Burt. We -- although it's not traditional, I guess, to tout the experience of the lawyers, because in this type of proceeding, the experience of the class counsel and the counsel is important to the Court.

Just briefly, the plaintiffs' lawyers will tell .

you about their experience, but they are very experienced in class action litigation, as well as litigation of this type involving these types of policies. I've been defending class actions for about 15 years. I've been involved in well over 150 class actions, and probably have litigated in 20 to 25 different states.

So if you have any questions procedurally or otherwise -- and also Ms. Pruitt is probably one of the leading class action lawyers in this state. If we can't answer your questions, I don't know who could.

With that said, we provided Your Honor with all of the papers, and I think we've tried to explain the background and the legal standard. We are here today on a -- simply a preliminary approval. And the standard set out in the case law is sort of like a range of reasonableness. It's not until the final fairness hearing several months down the road, after everyone has a chance to submit evidentiary materials, if there are any objectors, they will bring those objections to the Court, that the final approval is held. So that's why we're here today.

I do want to explain why we're here in this Court in particular, and what this litigation is about.

We've been litigating with our esteemed plaintiffs'

б

lawyers and, quite frankly, have, from time to time, been at each other's throats. We've been litigating since, I'd say, June of 2007, when the first of their cases was filed. We have had extensive discovery in the federal court proceedings. There are seven cases, including this one, in which plaintiffs' counsel is involved. Several in Arkansas, and then a few others around the country.

There is another case in Mississippi, a class action in Michigan, and two individual cases in Louisiana. But the first of their cases was filed in federal court here in Arkansas. There are -- there is another case in the western district of Arkansas. So we've been litigating for quite sometime, although this case has been recently filed.

why are we before this Court is essentially a procedural matter. We wanted to have a global resolution. So you'll see that the complaint is a national class in this case, which, for our purposes, covers about 46 or 48 states, because that's where the policy holders are located.

The case, really, the hub of the litigation is here in Arkansas because the company is located in Little Rock. Transamerica, which is the successor of Life Investors, has a location here in Little Rock, and

. 3

18,

that's where these policies have been administered out of.

We have been, like I say, involved in some contentious litigation. And we first began talking about the possibility of settlement over five months ago. I think we had our first meeting in October of last year. Then we had a two-day mediation in November of last year before a former federal district judge. We didn't settle at that mediation. We continued to talk. Class certification was denied about a week later in the case before Judge Wright in federal court here, which is a state court class. We continued to discuss settlement, and we reached an agreement within the past week or so, and we filed it with this Court.

The reason I'm bringing all this background up is -- because is, you'll see that the papers talk a lot about arm's length negotiation. You couldn't have had more arm's length negotiation than we had in this case in the process that we went through. And I wanted the Court to understand that, because I think it's important in the context of a preliminary approval.

What are these cases about? The cases involve a supplemental cancer insurance policy. And what that means is, it's called supplement because it is in addition to other insurance. It's not like a

1.0

1.5

comprehensive health insurance policy. It will pay cash benefits to the insured, even though they have other insurance. So in other words, if you're diagnosed with cancer, and say you have to go into the hospital, one of the benefits it pays is X hundred dollars -- \$200 per day while you're in the hospital.

And it has certain other fixed dollar benefits. If you have a lab test, you may get \$150. If you have certain surgeries, you may get X dollars, depending on the schedule in the policy. And it also has some other benefits that pay based upon the actual charges of the services.

So for example, chemotherapy is one of the benefits that pays the actual charges for the chemotherapy. So if someone goes to the hospital, gets the chemotherapy, for example, they may be fully covered under their own health insurance. They may be fully covered under Medicare. But they will get a check under this policy in cash for the actual charges of the chemotherapy.

Now, the dispute that's one of the central disputes in this case revolves around what does actual charges mean. And what happened in this particular -- with this particular case, back in 2004, the company began to do a review of its premium increases. These

б

1.1

policies also, the premiums can increase. You file the premium increases with the state departments of insurance. And as health care costs and claim costs go up, the premiums for the policies can go up also.

The company began investigating causes of the increases and determined that it was overpaying the benefits for actual charges. And how did that happen? It happened because these policies, when they originated back in the '70s, which is now, say, 30 years ago, the claims procedures were set up to pay benefits based upon the doctor's bills.

And so the insureds, to make their claim, to submit their proof of loss for actual charges for chemotherapy or whatever the case may be, would submit doctor's bills. The company would pay those bills.

Well, over time, what happened in the health care industry, with PPOs, HMOs, the billing practices changed and providers began to issue statements or paperwork that were not actually real bills. And sometimes they would have prices on there that weren't actually being paid. We call those list prices today. Hospitals are notorious for that nowadays. They inflate their list prices, sometimes to exorbitant amounts for economic reasons, maybe for trying to increase their reimbursements from Medicare, for

whatever reason.

1.2

But in any event, there is now sort of a lack of transparency, so to speak, in health care pricing. And many patients will get statements that aren't actually bills, and will have maybe chemotherapy X dollars. And those prices, list prices, are not actually being charged. They're not actually being paid.

But in any event, the company, over time, began to pay its claims on that basis. So it did this review. They determined it was overpaying the claims for actual charges. It sent out a notice to the policyholders explaining that, said that now when we submit claims, effective April or May 1 of 2006, it corrected its claim forms and procedures, make sure you send in documentation, whether it be EOBs or Medicare summary statements that show the actual amounts that are really owed and being paid to the doctors. And that is one of the central issues in the case.

The plaintiffs disagree with that. The plaintiffs say that no, the company was wrong to do that. The company was paying claims for actual charges one way and now it's changed its interpretation of actual charges. So therefore, it breached the contract, acted in bad faith.

The company says no, that's not correct. Actual

1,3

charges has to be interpreted according to its plain, simple, ordinary meaning. Under the context of this policy, it can only mean the actual amount that's really owed and being paid. Those have to be the actual charges. So that's kind of a legal dispute in the case, and it's really one of the central disputes for those policyholders who have been paid claims.

The other aspect of the case are the premium increases. Of -- I believe there are approximately 115,000 cancer policies outstanding, there are approximately 4,700 of those policies who have been paid claims on actual charges after April, May of 2006. But there are a large number of policyholders who have not been paid claims. Those policyholders are interested in their premiums, so -- and they want to keep the premium increases as low as possible because they want to keep their policies. They don't want them to become unaffordable.

so in any event, we finally came to an agreement, after a lot of negotiation. And I think that we're all agreed that the settlement is very fair and very reasonable and provides a lot of significant benefits to all the different categories of policyholders.

I'm not going to go through the settlement benefits unless Your Honor has any questions. But what

1.9

I will say is, it was a -- it was a very extensively negotiated process. And I think, as I said, we're all very comfortable with it.

And the last point I want to make, which is also reflected in the papers, there have been several other settlements in cases of this type. And we believe when you compare them, that there is no question that this is better than those settlements. One of the them in particular, which is called Skeleton v. Central United -- I believe I attached the final judgment to our brief. That was a settlement that has already received final approval by a trial court in Alabama.

It provides some monetary benefits that are not as good as the ones that we have provided in this case. And it also doesn't provide anywhere near the amount of nonmonetary or injunctive relief that we've provided.

There is also another settlement, the Robertson v. Liberty National case. We attached the findings of fact and conclusions of law that were entered in connection with the final judgment in that case. And again, when you compare those to our case, I don't think there's any question that ours is ultimately fairer, better, and provides more benefits to the policyholders.

But in any event, we're here today merely on

1.3

preliminary approval, and the legal standard for that requires that the Court simply find that what has been proposed is within a range of reasonableness. And I think -- I don't think there's any question that we will meet that standard. So with that, I'll turn this over to Mr. Bohrer. And if he has any additional words on behalf of the plaintiffs.

MR. BOHRER: May it please the Court, I'll be very brief. I really just want to assure the Court that in conducting the analysis, that the threshold legal requirements were easily and completely satisfied in this case. And I know it's a little unique because there's not a long litigation history of this litigation in your Court.

But you'll find further down the road that this case, this issue, has been litigated comprehensively and extensively for two years now. And I can assure you that the plaintiff lawyers in this case have an adequate amount of information to make an informed decision.

We've done depositions. We've conducted discovery. We know what the landscape is. We are familiar with these other settlements. And so with respect to the legal requirement that, number one, the settlement appears to be fair, reasonable, and

adequate. We submit, Your Honor, that it is. 1 Number two, it's clearly within the range of 2 possible or reasonable recoveries, given other 3 settlements which establish market value. And then 4 finally, most importantly, they are -- it has been 5 contentious litigation. And this is not a settlement 6 that is the result of any type of fraud or collusion, 7 and the record will establish that. Other than those 8 comments, Your Honor, I'm happy to answer any questions 9 that the Court may have. 10 Thank THE COURT: I don't have any at this time. 11 12 you. MR. BOHRER: Thank you. 13 THE COURT: Court is going to approve the 14 preliminary class settlement. Mr. Baker, do you want 15 to check with Debbie first or do you want me to sign it 16 and fill it in or what? How much time --17 MR. BAKER: One day. A full day uninterrupted 1.8 will be sufficient, we believe. I can run in there 19 real quick and see what she has in late July. 20 THE COURT: Okay. Anything further? 21 MR. BOHRER: Not from the plaintiffs, your Honor. 22 MR. BAKER: Not for the defendants, Your Honor. 23 Thank you for your time. 24

25

CERTIFICATE 1 STATE OF ARKANSAS SS. 2 COUNTY OF PULASKI 3 I, TAMMIE L. FOREMAN, CRR, RPR, CCR, official court reporter for the Third Division Circuit Court, Pulaski 4 County, Arkansas, certify that I reported the proceedings by stenographic machine shorthand, reporting 5 in the case of EDISON RUNYAN; DWIGHT PIPES; EARL L. PURIFOY; JOHN ROSS, 6 As the Legal Representative of ELIZABETH ROSS; MARY 7 WEIDMAN; DURAIN WEIDMAN; MARION HARRIS; and VAN R. NOLAN, Each Individually, and on Behalf of All Others 8 Similarly Situated, Plaintiffs CV 2009-2066 9 TRANSAMERICA LIFE INSURANCE COMPANY; LIFE INVESTORS INSURANCE COMPANY OF AMERICA; MONUMENTAL LIFE INSURANCE 10 COMPANY; and AEGON USA, INC., Defendants 11 before the Honorable Jay Moody, Pulaski County Circuit Judge, at Little Rock, Arkansas; that said proceedings 12 have been reduced to a transcription by me by means of computer-aided transcription, and the foregoing pages 1 13 through 14 constitute a true and transcript of the proceedings held to the best of my ability, along with 14 all items of evidence admitted into evidence. 15 I further certify that I am not a relative or employee of any of the parties, or of counsel, nor am I 16 financially or otherwise interested in the outcome of 17 this action. I serve as an impartial officer of the court and 18 abide by all professional and ethical principles of the National Court Reporters Association. 19 WITNESS MY HAND AND SEAL on this 26th day of June, 20 2009 Transle L. Kar . . . 21 ODE TO COM Photograph Problem - 410 CRR, RPR, CCR TAMMIE L. FOREMÁN, 22 My Consentration of the Certificate No. 305
Notary Public in and for FOREMAN
Pulaski County, Arkanyas

1: 048-14
ARKANSAS
SUPREMEN
COURT
FOREMAN
REPORTER
REPORT
REPOR Certificate No. 305 23 24 My Commission Expires: 25

TAMMIE L. FOREMEN